

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Patriot's Fund			FEC IDENTIFICATION NUMBER ▼ C C00490896		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee America's Best Western Inn			Date M M / D D / Y Y Y Y Y Y 11 / 02 / 2012		
Mailing Address 1010 State Highway M28 E			Amount 700.86		
City Marquette		State MI	Zip Code 49855		Transaction ID : SE.4355
Purpose of Expenditure Lodging for door to door		Category/Type 002		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01	
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL J BENISHEK			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 2340.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee America's Best Western Inn			Date M M / D D / Y Y Y Y Y Y 11 / 02 / 2012		
Mailing Address 1010 State Highway M28 E			Amount 700.86		
City Marquette		State MI	Zip Code 49855		Transaction ID : SE.4356
Purpose of Expenditure lodging for door to door		Category/Type 002		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: PETER HOEKSTRA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 2340.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			1401.72		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Mr. Daniel Scott Carlson</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y 11 / 02 / 2012</p>					

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NAME OF COMMITTEE (In Full) Patriot's Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00490896 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Great Lakes Strategies Group			Date <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 11 / 02 / 2012</div> </div>	
Mailing Address PO Box 4652			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">950.00</div>	
City East Lansing	State MI	Zip Code 48826		
Purpose of Expenditure Printing and design costs for lit	Category/ Type	006	Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL J BENISHEK			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Great Lakes Strategies Group			Date <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 11 / 02 / 2012</div> </div>	
Mailing Address PO Box 4652			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">950.00</div>	
City East Lansing	State MI	Zip Code 48826		
Purpose of Expenditure Printing and design costs for lit	Category/ Type	006	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: PETER HOEKSTRA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1900.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Daniel Scott Carlson

Signature

[Electronically Filed]

Date

MM / DD / YYYY
11 / 02 / 2012

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NAME OF COMMITTEE (In Full) Patriot's Fund		FEC IDENTIFICATION NUMBER ▼ C C00490896	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Macatawa Bank			Date MM / DD / YYYY 11 / 01 / 2012	
Mailing Address 126 Ottawa Ave NW			Amount 190.00	
City Grand Rapids	State MI	Zip Code 49503	Transaction ID : SE.4351	
Purpose of Expenditure Prepaid cards for food for door to door		Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01	
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL J BENISHEK			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 190.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Macatawa Bank			Date MM / DD / YYYY 11 / 01 / 2012	
Mailing Address 126 Ottawa Ave NW			Amount 190.00	
City Grand Rapids	State MI	Zip Code 49503	Transaction ID : SE.4352	
Purpose of Expenditure Prepaid cards for food for door to door		Category/ Type 002	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:	
Name of Federal Candidate Supported or Opposed by Expenditure: PETER HOEKSTRA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 190.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	380.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Daniel Scott Carlson

Signature

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Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Meijer		Date MM / DD / YYYY 11 / 01 / 2012	
Mailing Address 5531 28th Street SE		Amount 500.00	
City Grand Rapids	State MI	Zip Code 49546	Transaction ID : SE.4353
Purpose of Expenditure Gas cards for door to door		Category/ Type 002	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL J BENISHEK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 690.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Meijer		Date MM / DD / YYYY 11 / 01 / 2012	
Mailing Address 5531 28th Street SE		Amount 500.00	
City Grand Rapids	State MI	Zip Code 49546	Transaction ID : SE.4354
Purpose of Expenditure Gas cards for door to door		Category/ Type 002	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: PETER HOEKSTRA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 690.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	4681.72

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Daniel Scott Carlson

Signature

[Electronically Filed]

Date

MM / DD / YYYY
11 / 02 / 2012